Introduced by Assembly Member Shirley Horton

February 21, 2003

An act to add Chapter 5.4 (commencing with Section 8455) to Division 1 of Title 2 of the Government Code, relating to public safety, and declaring the urgency thereof, to take effect immediately.

LEGISLATIVE COUNSEL'S DIGEST

AB 1145, as introduced, Shirley Horton. State buildings: defibrillators.

Existing law authorizes the Emergency Medical Services Authority to establish minimum standards for the training and use of automatic external defibrillators by individuals not otherwise licensed or certified for the use of the device. Existing law provides that only persons who meet these standards shall be approved for persons and issued a prescription authorizing them to use an automatic external defibrillator on a patient not specifically identified when the prescription is given.

Existing law requires all money received by the state from the federal government, the expenditure of which is administered through or under the direction of a state agency, to be deposited in the Federal Trust Fund, which is continuously appropriated for expenditure for the purposes for which the money is deposited in that fund.

This bill would require the Department of General Services to apply for specified federal funds for the purchase of automated external defibrillators to be located within state-owned and leased buildings. It would require the Department of General Services, in consultation with the Emergency Medical Services Authority, and the American Heart Association to develop and adopt policies and procedures relative to the **AB** 1145 - 2 —

placement and use of automated external defibrillators in state-owned and leased buildings and ensure that training is consistent with specified requirements.

This bill would declare that it is to take effect immediately as an urgency statute.

Vote: ²/₃. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

The people of the State of California do enact as follows:

SECTION 1. Chapter 5.4 (commencing with Section 8455) is 1 added to Division 1 of Title 2 of the Government Code, to read: 2

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CHAPTER 5.4. AUTOMATED EXTERNAL DEFIBRILLATORS IN STATE **BUILDINGS**

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- 8455. (a) The Department of General Services shall apply for federal funds made available through the federal Community Access to Emergency Devices Act (Public Law 107-188) for the purchase of automated external defibrillators to be located within state-owned and leased buildings.
- (b) The Department of General Services shall, in consultation 13 with the Emergency Medical Services Authority and the American 14 Heart Association, develop and adopt policies and procedures relative to the placement and use of automated external defibrillators in state-owned and leased buildings and ensure that training is consistent with Section 1797.196 of the Health and Safety Code and the regulations adopted pursuant to that section. In these consultations, the department may consider all of the following:
 - (1) Whether the public has access to the state-owned or leased building.
 - (2) Placement within the building that maximizes access to the device.
 - (3) The manufacturer and medical directions regarding placement and use of the device.
 - (4) The appropriate oversight and maintenance of the device at a particular location.
 - (5) Whether to require those who are trained to use the automated external defibrillators pursuant to Emergency Medical

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1 Services Authority standards to receive cardiopulmonary 2 resuscitation training.

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SEC. 2. This act is an urgency statute necessary for the immediate preservation of the public peace, health, or safety within the meaning of Article IV of the Constitution and shall go into immediate effect. The facts constituting the necessity are:

Over 300,000 Americans die each year from cardiac arrest. Every two minutes, an individual goes into cardiac arrest in the United States. The chance of successfully returning to a normal heart rhythm diminishes by 10 percent each minute following sudden cardiac arrest. Eighty percent of cardiac arrests are caused by ventricular fibrillation, for which defibrillation is the only effective treatment. Sixty percent of all cardiac arrests occur outside the hospital. The average national survival rate for out-of-hospital cardiac arrest is only 5 percent. Communities that have established and implemented public access defibrillation programs have achieved average survival rates for out-of-hospital cardiac arrest as high as 50 percent. According to the American Heart Association, wide use of defibrillators could save as many as 50,000 lives nationally each year. Successful public access defibrillation programs ensure that cardiac arrest victims have access to early 911 notification, early cardiopulmonary resuscitation, early defibrillation, and early advanced care. For these reasons it is necessary that this act take effect immediately.